| EXPOSURE TO IONIZING RAD | RADIATION | ANNUAL | ONAL | REPORT OF | REPORT OF PERSONNEL EXPOSURE TO IONINZING RADIATION REPORT OF PERSONNEL EXCEEDING RADIATION EXPOSURE LIMITS | EXPOSURE | TO IONIN | ZING RADI | ATION | (REPORT SYN | (REPORT SYMBOL MED 6470-1) |
|--|-----------------------------------|----------------------------------|------------------|---|---|---------------------------|----------------------------------|-----------------------------------|--|--|--|
| 1. ACTIVITY SUBMITTING REPORT (Name and Address) | Address) | | | | | 3. CALENI | 3. CALENDAR YEAR REPORTED | SPORTED | | 4. DATE PREPARED | ARED |
| MEMBER'S INFORMATION | FORMATION | | | PERIC EXPC | PERIOD OF EXPOSURE | | DOSE E | QUIVALENT (rem) | DOSE EQUIVALENT THIS PERIOD (rem) | | ACCUMULATED (rem) |
| Name (Last, First, Middle Initial) | Social Security Number 6 | Date Of Birth YYYYMMMDD | Occ Code 8 | From YYYYMMMDD 9 | TO YYYYMMMDD 10 | Shallow Dose Equiv. | Deep Dose Equiv. Photon | Deep Dose Equiv. Neutron | Committed Effective Dose Equiv. | Total Effective Dose Equiv. | Lifetime Total Effective Dose Equiv. |
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| 17. REWARKS (Continue on additional sheet(s) if | t(s) if necessary) | | | | | | | | | | |
| | | | | | | | | | | | |
| 18. Signature (Individual Preparing Report) | ort) | | | 19. APPROV TITLE: | /ED (Radiati | on Health | Officer, M | edical Off | icer, or App | 19. APPROVED (Radiation Health Officer, Medical Officer, or Approving Authority) TITLE: | city) |
| NAVMED 6470/1 (4-1999) | | | | 1 | | | | | | Page of | |

INSTRUCTIONS FOR PREPARATION OF NAVMED 6470/1

Personnel Exposure to Ionizing Radiation (Report Control Symbol MED 6470-1) Personnel Exceeding Radiation Exposure Limits (Report Control Symbol MED 6470-2)

1. General

- a. This dual purpose form may be used for either report, but the reports must not be combined on the same form.
- b. These reports are required on all personnel in the Naval Establishment who have been or are being monitored for exposure to Ionizing Radiation. It shall be the responsibility of each activity of the Naval Establishment having personnel monitored to submit these reports (both paper copy and diskette) to the Naval Dosimetry Center per the following time periods. Retain a copy for your records.
- (1) NAVMED 6470/1 Report of Personnel Exposure to Ionizing Radiation shall be submitted annually to the Naval Dosimetry Center, prior to 1 April or within 30 days of receipt of final annual exposure information (whichever is later) and shall include all personnel on board 31 December who were monitored for such exposure at any time during the calendar year at the reporting activity.
- (2) NAVMED 6470/1 Report of Personnel Exposure to Ionizing Radiation must also be prepared and submitted as a situational report if an individual so monitored was transferred, or terminated employment during the calendar year. This report shall be submitted to the Naval Dosimetry Center within 30 days of receipt of final exposure information for such transfer or termination. Data shall be obtained from the individual's Record of Occupational Exposure to Ionizing Radiation.
- (3) NAVMED 6470/2 Report of Personnel Exceeding Radiation Exposure Limits is required on all personnel in the Naval Establishment who have exceeded radiation exposure limits. It shall be the responsibility of the activity at which the limits were exceeded to submit this report to BUMED, Undersea Medicine and Radiation Health Division. A copy of the report shall be attached to each individual's NAVMED 6470/10 for permanent retention. If personnel have received a dose of more then 3 rem in any one calendar quarter, the report shall be forwarded within 30 days from the determination of such exposure. If personnel have received a dose of more than 5 rem in a single incident, a report shall be forwarded within 24 hours from the determination of such exposure. If any individual has received a dose of more than 25 rem in a single incident, Chief, Bureau of Medicine and Surgery, shall be notified immediately by immediate message or telephone.

2. Specific Coding Instructions (see NAVMED P-5055, Chapter 5, for additional information)

- a. Check the appropriate boxes to indicate which report is being submitted and if the report being submitted is an annual or situational report.
 - b. Item
 - 1. Enter name and address of reporting activity.
 - 2. Enter UIC.
 - 3. Enter calendar year reported.
 - 4. Enter date reported.
- 5. Enter name as currently carried on rolls last name, first name, and middle initial as appropriate. If this combination exceeds 40 spaces, truncate name at 40 characters.
- 6. Enter individual's social security account number. Enter social security number, e.g., 000-00-0000. If the individual does not have a social security number, i.e., a foreign national, enter a pseudo SSN as: 800 for the first 3 digits, the year, month, and day of birth. (i.e., 800-YY-MMDD).
 - 7. Enter individual's year and month of birth.
 - 8. Enter occupation code in which the majority of exposure occurred (see NAVMED P-5055, chapter 5, for occupation codes).
 - 9. Enter 4-digit year, month and day monitoring period was considered to have started using no spaces, i.e., 19991027.
 - 10. Enter 4 digit year, month and day monitoring period was considered to have ended using no spaces, i.e., 19991226.

Note: For items 11-16, enter radiation doses received in rem to three decimal places, i.e., 03.450. Enter doses evaluated as zero as 00.000. Do not use 'X's' or the term minimal. If not monitored, leave blank. Do not enter 00.000 for radiation types not specifically monitored.

- 11. Enter shallow dose equivalent.
- 12. Enter deep dose equivalent photon.
- 13. Enter deep dose equivalent neutron dose.
- 14. Enter the committed effective dose equivalent.
- 15. Enter total effective dose equivalent accumulated for this period; sum of items 12, 13, and 14.
- 16. Enter the accumulated total lifetime dose equivalent.

Note: Items 17, 18, and 19 are self-explanatory.

Reporting Procedures are explained in detail in Chapter 5 of NAVMED P-5055, Radiation Health Protection Manual.